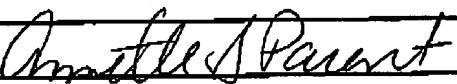


PTO/SB/21 (09-04)

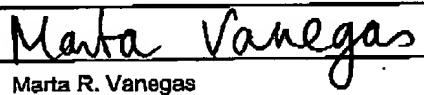
TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>		Application Number	09/597,796	
		Filing Date	June 20, 2000	RECEIVED
		First Named Inventor	Skeiky, Yasir	CENTRAL FAX CENTER
		Art Unit	1645	JAN 04 2006
		Examiner Name	Swartz, Rodney P.	
		Attorney Docket Number	014058-009050US	
Total Number of Pages in This Submission	12			

ENCLOSURES (Check all that apply)			
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	
		<input checked="" type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Marked-up copy of Filing Receipt <input type="checkbox"/> Supplemental Application Data Sheet	
		Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Annette S. Parent		
Date	January 4 2006	Reg. No.	42,058

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. 1-571-273-8300 on the date indicated below.

Signature			
Typed or printed name	Marta R. Vanegas	Date	January 4 2006

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TOWNSEND and TOWNSEND and CREW LLP

By: Marta Vanegas

PATENT
Attorney Docket No.: 014058-009050US

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JAN 04 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

SKEIKY et al.

Application No.: 09/597,796

Filed: June 20, 2000

For: FUSION PROTEINS OF
MYCOBACTERIUM TUBERCULOSIS

Customer No.: 20350

Confirmation No. 6269

Examiner: Swartz, Rodney P.

Technology Center/Art Unit: 1645

AMENDMENT AFTER ALLOWANCE
UNDER 37 CFR § 1.312(a)

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Notice of Allowance mailed on November 18, 2005 please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.